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APPLICATION NO.	FILING DATE	F	IRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/577,232 TITLE OF INVENTION:	May 23, 2000		Lundy Lewis		019287-0317258	3633
	RATUS FOR SERVICE AN	IAI VOIC INI CEDV	ICE LEVEL MANA	GMENT (SLM)		
WETHOD AND AFFAI	ATOSTOTI SETTIOE AN	ALTOID IN OLIV	TOL LEVEL WATER	GIVIEIVI (GEM)		
APPLN, TYPE	SMALL ENTITY	ISSUE FE	E PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510.0	0	\$0.00	\$1510.00	April 26, 2010
EXAMINER		ART UNI	r CL	ASS-SUBCLASS		
David E. England		2443		709-224000		
Change of correspondenc CFR 1.363).	e address or indication of "Fe	ee Address" (37		he patent front page,		/inthrop Shaw Pittman LLF
_ ′	lence address (or Change of	Correspondence	<ol><li>the names of u or agents OR, alter</li></ol>	p to 3 registered pate natively,	ent attorneys	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
PTO/SB/47; Rev 03-02 o Number is required.	or more recent) attached. Use	of a Customer	2 registered patent listed, no name wil	attorneys or agents. I l be printed.	f no name is 3_	<del>-</del>
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON TI	HE PATENT (print o	r type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be a 37 CFR 3.11. Completion of	low, no assignee dof this form is NOT	ata will appear on the a substitute for filing	ne patent. If an assig gan assignment.	gnee is identified below, the c	locument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Computer Associates Think, Inc. Islandia, New York						
				☐ Individual ☐ (	Corporation or other private gr	oup entity U Government
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☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 033975			
5. Change in Entity Status	(from status indicated above		Doposit / toodine 1 vai		***	
a. Applicant claims S	MALL ENTITY status. See 1	37 CFR 1.27.	* *	<u> </u>	ALL ENTITY status. See 37 C	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate	e Fee and Publicativill not be accepted and Trademark (	on Fee (if any) or to from anyone other the Office.	re-apply any previous an the applicant; a re	ly paid issue fee to the applica gistered attorney or agent; or t	tion identified above. he assignee or other party in
Authorized Signature	ZJ			Date Apri	il 6, 2010	
Typed or printed name Syed Jafar Ali				Registration No. 58,780		
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